

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/568546

FILING DATE

APPLICANT(S)

Art 34 claims

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1					
2		1				
3						
4						
5						
6						
7						
8		1				
9	1					
10	1					
11		1				
12			1			
13	1					
14		1				
15						
16						
17						
18		1				
19			1			
20						
21	1					
22		1				
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48						
49						
50						
TOTAL IND.	4		↓		↓	↓
TOTAL DEP.	20	←	←	←		
TOTAL CLAIMS	24					

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51						
52						
53						
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96						
97						
98						
99						
100						
TOTAL IND.			↓		↓	↓
TOTAL DEP.		←	←	←		
TOTAL CLAIMS						